PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2004 12 - 8-04

Application or Docket Number

10633597

R	CE	CLAIMS AS	S FILED - (Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER SMALL	
TOTAL CLAIMS			· . ·		·			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		•	BASIC FEE	395.∞	OR	BASIC FEE	790.00
TOTAL CHARGEABLE CLAIMS			6 minus 20=		• -			×		OR	×	
INDEPENDENT CLAIMS			a mir	nus 3 =				×		OR	×	
MULTIPLE DEPENDENT CLAIM PR			RESENT									
L	15 - d:#a.co.200	io column 1 is	less than zero, enter "0" in colui			nlumn 2	J	*		OR	TOTAL	790°
* If the difference in column 1 is less than zero, ento						31011117 2		TOTAL		OR	TOTAL.	
•	Ci	LAIMŞ AS A (Column 1)	MENDED - PART II (Column 2) — (Column 3)					SMALLE	NTITY	OR	SMALL	
		CLAIMS	1	i spr _a t i	F 5 1]		MUDI			ADDL
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	ousur	PRESEUD CXTRA		· RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		2		×		OR	×	
	Independent	*	Minus	**4		=		×		OR	Х	
Ā	FIRST PRESENTATION OF MULTIPLE DEPENDEN				CLAIM		J					
+										OR	TOTAL	
ADDIT FEE												<u> </u>
	.	(Column 1)		(Colu		(Column 3)	4			i		1 0001
AMENDMENT B	0	CLAIMS REMAINING		MOM	BER	PRESENT		RATE	ADDI JANCIT		RATE	ADDI: TIONAL
		AFTER AMENDMENT		DIAG BREVE	LOB TOB	EXTRA			FEE.			FEE
	Totai	•	Minus	••	·		_	x		CIR	×	
	Inaependent		Minus	44.5		=	_	×		OR	×	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								 	ĺ.,,		
								L'-		OR	TOTAL	
ADDIT FEEL OR ADDIT FEEL												
		(Column 1)			mn 2)	(Column 3	<u>)</u>			_		
AMEND MENT C	V •	CLAIMS REMAINING	·		HEST MBER	PRESENT			AUÜI:		SATE	ADDI- TIONAL
		AFTER AMENDMENT			OUSLY	.EXTRA	Ì	RATE	TIONAL FEE		RATE	FEE
	Total	*	Minus	**		=		×	1 2 2	OR	Х\$	
	Independent	*	Minus	***		= .	1.			1	\ \ \ \	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM].		 	OR		-
+OR										1		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
***	ll the "Highest Nu The "Highest Nun	mber Previously P aber Previously Pa	aid For" IN THI id For" (Total o	IS SPACE r Independ	is less tha dent) is the	an 3, enter "3." e highest numb	ber lo		propriate bo	ox in c	olumn 1.	